

and health by reading and signing the following INFORMED CONSENT AGREEMENT. **WARNING! BY SIGNING THIS FORM YOU GIVE UP IMPORTANT LEGAL RIGHTS INCLUDING THE RIGHT TO SUE. PLEASE READ CAREFULLY:**

I, \_\_\_\_\_, agree to the following on behalf of myself or on behalf of my child, of \_\_\_\_\_

\_\_\_\_\_ and Athletics and I understand that each person (myself included), has a different capacity for participating in such activities, facilities, programs and services. I am aware that all activities, services and programs offered are educational, recreational, or self-directed in nature. I assume full responsibility during and after my participation for my choices to use or apply, at my own risk, any portion of the information or instruction I receive or equipment I use. I understand I am free to reduce, modify or completely withdraw from my involvement in activities and realize that I should do so upon recognizing any signs of transient lightheadedness, fainting, chest discomfort, leg cramps, nausea, etc.

In addition, I acknowledge that I have inquired about the nature of any activity, program or services that I am not completely familiar with and I have been informed of any inherent risks.

I further understand that Athletics and Recreation may collect health and other personal information from me with the intent to fulfill their obligation to me. I agree with their practice of keeping my personal information confidential and subject only to legal requirements to disclose or legal exceptions (emergency). I accept that the University and Recreation and Athletics will use this information to improve the services I receive. I also appreciate that Recreation and Athletics and the University will not disclose, divulge or otherwise communicate to any person or business any such information without my written consent to do so. Finally, I am aware that I can obtain the complete privacy policy anytime, by contacting the Welcome Centre Administrator, Department of Recreation and Athletics at Carleton University at 1 (613) 520-2600 ext. 8441.

**I FURTHER AGREE AS FOLLOWS:**

1. **TO WAIVE ANY AND ALL CLAIMS** arising from my participation in "activities" that I have or may have in the future against Carleton University, the Department of Recreation and Athletics, its directors, officers, employees, games officials, volunteers and representatives associated with the University (hereinafter collectively referred to as the "Releasees");
2. **TO RELEASE** the Releasees from any and all liability for death or any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer arising from my participation or due to any cause whatsoever;
3. **TO INDEMNIFY** the Releasees from any and all liability for any damage to property or of personal injury to, any third party, arising from my participation;
4. **That it will be my responsibility for personal health, medical, dental, and accident insurance coverage.**
5. **THAT THIS AGREEMENT** is binding upon my heirs, next of kin executors, administrators, assigns and representatives in the event of my death or incapacity; **THAT I HAVE READ this agreement AND I UNDERSTAND ITS CONTENT; AND THAT BY SIGNING IT I AM WAIVING CERTAIN LEGAL RIGHTS** which I or my heirs, next of kin, executors, administrators and assigns may have against the Releasees

**SIGNED THIS** \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at Ottawa Ontario.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of Witness